

State of California—Health and Welfare Agency
Form Approved OMB No. 2050—0039 (Expires

Please print or type. (Form designed for use on elite (12-pitch typewriter).

**See Instructions on Back of Page 6
and Front of Page 7**

**Department of Health Services
Toxic Substances Control Division
Sacramento, California**

Please print or type. (Form designed for use on 8 1/2 x 11 in. 12-ptch typewriter.)							
UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD 008 252 982	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address PARA PLATE 15910 SHOEMAKER AVE., CERRITOS, CA 90703		A. State Manifest Document Number 88684604					
4. Generator's Phone (213) 404-3434		B. State Generator's ID 110837					
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES		6. US EPA ID Number CAD 042 245 001	C. State Transporter's ID 110837				
7. Transporter 2 Company Name		8. US EPA ID Number	D. Transporter's Phone 213 698-0991				
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD WHITTIER, CA 90602		10. US EPA ID Number CAD 042 245 001	E. State Transporter's ID CAD 143045001				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. 009	Type DM	13. Total Quantity 001280 6	14. Unit Wt/Vol	I. Waste No. 211,212	
a. WASTE ORM-A N.O.S ORMA-A NA 1693 (FLEXOSOLVENT)						EPA/Other F003	
b.						State	
c.						EPA/Other	
d.						State	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above					
A) FOR RECYCLE		a. 01	b.				
		c.	d.				
15. Special Handling Instructions and Additional Information PROFILE NUMBER B 10016							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.							
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Frank E. Hernandez		Signature 		Month Day Year 03/01/91			
TRANSPORTER 17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name John J. Cirino		Signature 		Month Day Year 03/01/91			
TRANSPORTER 18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name Frank E. Hernandez		Signature 		Month Day Year 03/01/91			
FACILITY 19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name John Hause		Signature 		Month Day Year 03/01/91			

DHS B022 A (1/88)

EPA B700—22

(Rev. 9-88) Previous editions are obsolete.

Do Not Write Below This Line

WHAT: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

TSDF SENDS THIS COPY TO BONS WITHIN 30 DAYS OF RECEIPT.